



## OFFICE OF SAFETY MANAGEMENT

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Safety and Occupational Health Specialist  
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### MISSION

The Office of Safety Management was established in March 1994 to develop and manage a safety program, as outlined in the Department of the Army Safety Program. This office monitors guidelines set forth by the Environmental Protection Agency (EPA), the Occupational and Safety Health Administration (OSHA), and the College of American Pathologists (CAP); serves as AFIP liaison with U.S. Army Medical Command (MEDCOM) Safety Office; coordinates with the following Walter Reed Army Medical Center departments—Safety Office, Occupational Health, Industrial Hygiene, Health Physics, Department of Public Works, and the Fire Department. This office also maintains an inventory of all hazardous chemicals located within the AFIP; serves as a member of many safety-related committees; investigates all on-the-job injuries; and maintains a reference library of EPA, OSHA, DOD, and local safety-related publications.

### STAFF

#### *Administrator*

(A) Ronald H. Suter

### ACTIVITIES

The Office of Safety Management has developed a computerized hazardous chemical inventory system for various reporting requirements. The system is being upgraded and hopefully will be available for use on the LAN System by March 1996.

This office has also published a Waste Management regulation, eliminating four to five waste-related publications, and a new Safety Program regulation will be published in January 1996, eliminating another four to five safety-related publications.

The Office of Safety Management procured and maintains a computerized OSHA Illness/Injury Log. The log produces a report that is mandated by OSHA on all occupational illnesses or injuries.

The Office of Safety Management and Quality Assurance conducted all of the annual training required by OSHA (hazardous communication, bloodborne pathogen) to the staff of AFIP.

### GOALS

1. Develop a computerized training program to track required training on all AFIP employees.
2. Become more involved in community emergency planning programs and resource levels.
3. Establish and publish a monthly or quarterly safety newsletter.
4. Expand the AFIP Safety Program in order to investigate occupational illnesses and injuries more thoroughly.
5. Research the possibility of substituting nonhazardous chemicals for the current hazardous chemicals.
6. Continue to participate in the development and management of an Institute comprehensive occupational/industrial medicine program.